

CONISBROUGH  
URBAN DISTRICT COUNCIL



REPORT

ON THE

HEALTH OF THE DISTRICT

DURING THE YEAR ENDING DECEMBER 31st, 1948

by

Dr. JOHN LEIPER, M.B.E.

MEDICAL OFFICER of HEALTH

together with the

REPORT OF THE CHIEF  
SANITARY INSPECTOR

Mr. R. E. INGLEBY



# CONISBROUGH URBAN DISTRICT COUNCIL

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## MEMBERS 1948

### Chairman of the Council :

Councillor B. ROBERTS, J.P., County Councillor.

### Vice-Chairman of the Council :

Councillor R. H. SHEPHARD.

### Chairman of the Public Health Committee :

Councillor : I. HOUGHTON

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### Medical Officer of Health :

JOHN LEIPER, M.B.E., M.B., CH.B., M.R.C.S., L.R.C.P., D.P.H.

### Chief Sanitary Inspector and Director of Public Cleansing :

R. E. INGLEBY, M.S.I.A., A.R.S.I., R.P.C.

### Chief Clerk (Divisional Public Health Department):

RONALD M. MARTIN.

### Clerk to Sanitary Department :

A. JONES.

# CONISBROUGH URBAN DISTRICT COUNCIL

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## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

For the Year Ended December 31st, 1948.

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To the Chairman and Members of the  
Conisbrough Urban District Council.

Mr. Chairman, and Gentlemen,

I have the honour to present my Annual Report for the year 1948, and as it is my first Report of this nature to your Authority, I find it my pleasant duty to pay personal tribute to my predecessor, Dr. D. T. Clark. Since taking over the appointment from Dr. Clark, I have met with every courtesy, kindness and help, for which I take this opportunity of thanking him. I have also been most impressed with the sound reasoning of Dr. Clark regarding the immediate and long term Health objectives in your District.

I took up the appointment of Medical Officer of Health to the Conisbrough Urban District, and Divisional Medical Officer of Health of Division No. 30, West Riding County Council on the 1st April, 1948. The National Health Service Act, 1946, came into operation three months later, on the 5th July, and thus I have found it to be a year of expansion in the social services of your District. The personal health services, including the day-to-day administration of the work of the Health Visitors, School Nurses, Midwives, and Home Nurses were gradually brought under Divisional administration during the year, at the end of which, this process was almost complete.

An important advance in the Maternity and Child Welfare Service was marked by the appointment of Dr. J. C. A. Renshaw at the end of June, 1948, as Junior Obstetrician. This was a combined appointment, the first of its type in the West Riding, and entailed the supervision of the 22 lying-in beds of the Montagu Hospital, Mexborough, and the examination of expectant mothers at five Ante-Natal Clinics held in this Divisional Area. The Clinics at Conisbrough and Denaby were well attended during the year by

expectant mothers, and I feel that the appointment of the Junior Obstetrician will, as time goes by, be high on the list of those factors which will ensure a minimum wastage of infant life, and also help to diminish even still further the small risk attached to the confinement of mothers in your District.

Whilst there have been these far reaching changes in the administration and work of the personal health services affecting the individual, I am glad to state that I found the environmental sanitary work exceedingly well carried out, and in your District, I greatly hope that the one will not easily become out of step with the other.

I did, however, feel that there was need for more integration of the efforts of the sanitary staff and the staff of the personal medical services, and this was arranged.

The maintenance of repairs in the home, public cleansing, cleanliness and purity of food sold in your District, the eradication of infestations in the home, the tracing and preventive measures taken in the occurrence of infection, together with the great quantity of other sanitary work which has been carried out during the year so thoroughly by Mr. R. E. Ingleby, M.S.I.A., are to my mind most healthy signs. The local environmental health position was most fully explained to me by Mr. Ingleby on my taking over the appointment.

In regard to the health aspect of the housing position in your District, the relatively large number of sub-standard properties incapable in many cases of being adequately repaired so as to tender them fit for habitation, and which often house two or more families, and the large percentage of homes without hot water supply in your Industrial District, strike disquieting notes.

During the year, I am glad to recall that you decided to give a small allocation of tenancies of council houses to tuberculous patients, undergoing domiciliary treatment, who were living in overcrowded circumstances. I feel that by this measure, in addition to the routine X-ray check of contacts, and sanatorium treatment of cases, we will prevent the spread of this disease, and thus help to reduce its incidence.

Starting during the year, it is hoped to establish a permanent record of the socio-medical conditions in your District and the Divisional Area as a whole.



The year has been one of great social events and changes which will be reflected shortly in your Annual statistics. My appreciation of the Health situation in your District is that you are now on the threshold of a new era of social medicine. By means of health education and team work of the social and environmental hygiene staffs it is hoped slowly to come to a position where the priceless gem of positive health of the people of your District may be obtained.

I would further remind you that a polluted atmosphere mocks our efforts to attempt positive health, but the progress of ideas of social medicine is now so rapid that the time can be foreseen when such curious anomalies will be no more than a memory.

In conclusion may I take this opportunity of thanking the members of the Council for their help and keen interest in all matters relating to the health of the District. I also wish to thank Mr. R. W. Birch, Clerk to the Council, and all the Officials of the Conisbrough Urban District Council for their co-operation and help. Also Mr. Ingleby and members of his staff, and my staff for their assistance in the preparation of this Report.

I remain,

Your obedient Servant,

JOHN LEIPER,

M.B.E., M.B., CH.B., M.R.C.S., L.R.C.P., D.P.H.,

Medical Officer of Health.

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## SECTION A.

## NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres) ... ..	1,593
Registrar-General's estimate of Resident Population, mid 1948 ... ..	16,530
Number of inhabited houses (31st December, 1948)	4,080
Net product of Penny Rate ... ..	£215
Rateable Value ... ..	£57,213
Height above Sea Level (in feet) ... ..	25—275

The main feature of the Conisbrough Urban District is Conisbrough Castle, an ancient monument of great antiquity, which is also the setting for Sir Walter Scott's novel *Ivanhoe*, and whose situation dominates the eastern part of your District. On the ancient background of Castle and Church the present picture of your District is consequent on the sinking in the last century of coal mines, notably the Denaby Main Mine at the western end of your District, and also the Cadeby Main Mine, which is just inside the northern boundary of what has now become a highly industrial district. The main Industry is thus deep seam coal mining and during the year there has been a minimum amount of unemployment.

The housing position consists of an admixture of very old property in the neighbourhood of Conisbrough Castle, Colliery rows built about the turn of the century, and Council houses well situated with modern amenities which now number about 586, built under the various Housing Acts.

## VITAL STATISTICS FOR 1948.

	Males	Females	Total
Live Births : Legitimate ... ..	206	180	386
Illegitimate ... ..	13	9	22
	<hr/> 219	<hr/> 189	<hr/> 408
Stillbirths ... ..	9	3	12
Deaths of Infants under 1 year ... ..	16	8	24
Deaths (all ages) ... ..	90	80	170
Birth Rate per 1,000 of the estimated resident population ... ..	24.68		
Stillbirths—Rate per 1,000 total births (live and still) ... ..	26.96		
Death Rate per 1,000 estimated population ... ..	10.3		

## Deaths from Puerperal Causes :

	Deaths	Death-rate per 1,000 total (live and still) Births
Puerperal and post-abortive sepsis	Nil	—
Other maternal causes ... ..	Nil	—
	<hr/> Nil <hr/>	<hr/> — <hr/>

## DEATHS FROM ALL CAUSES DURING 1948.

	Cause of Death	Males	Females
1.	Typhoid and Paratyphoid Fevers ... ..	—	—
2.	Cerebro-Spinal Fever ... ..	—	—
3.	Scarlet Fever ... ..	—	—
4.	Whooping Cough ... ..	1	—
5.	Diphtheria ... ..	1	—
6.	Tuberculosis of Respiratory System ... ..	8	2
7.	Other forms of Tuberculosis ... ..	3	—
8.	Syphilitic Diseases ... ..	—	1
9.	Influenza ... ..	2	1
10.	Measles ... ..	—	—
11.	Acute Poliomyelitis and Polioencephalitis ... ..	—	—
12.	Acute Infective Encephalitis ... ..	—	—
13.	Cancer of Buccal Cavity and Oesophagus (m) and Uterus (f) ... ..	1	2
14.	Cancer of Stomach and Duodenum ... ..	1	2
15.	Cancer of Breast ... ..	—	5
16.	Cancer of all other sites ... ..	5	8
17.	Diabetes ... ..	—	1
18.	Intracranial Vascular Lesions ... ..	5	9
19.	Heart Disease ... ..	25	24
20.	Other Diseases of Circulatory System ... ..	—	3
21.	Bronchitis ... ..	6	2
22.	Pneumonia ... ..	3	4
23.	Other Respiratory Diseases ... ..	—	—



								Males	Females
24.	Ulcer of Stomach or Duodenum	...	...	...	...	...	3	—	
25.	Diarrhoea (under 2 years)	...	...	...	...	...	2	—	
26.	Appendicitis	...	...	...	...	...	—	—	
27.	Other Digestive Diseases	...	...	...	...	...	1		1
28.	Nephritis	...	...	...	...	...	—		2
29.	Puerperal and Post-Abortive Sepsis	...	...	...	...	...	—	—	
30.	Other Maternal Causes	...	...	...	...	...	—	—	
31.	Premature Birth	...	...	...	...	...	4		4
32.	Congenital Malformations, Birth Injuries, etc.						5		2
33.	Suicide	...	...	...	...	...	1	—	
34.	Road Traffic Accidents	...	...	...	...	...	2		1
35.	Other Violent Causes	...	...	...	...	...	5		2
36.	All Other Causes	...	...	...	...	...	6		4
								<hr/>	<hr/>
Total from all causes							...	90	80

## Deaths from :

Cancer (all ages)	...	...	...	...	...	...	...	24
Measles (all ages)	...	...	...	...	...	...	...	—
Whooping Cough (all ages)	...	...	...	...	...	...	...	1
Diarrhoea (under 2 years of age)	...	...	...	...	...	...	...	2
Pulmonary Tuberculosis (all ages)	...	...	...	...	...	...	...	10
Other forms of Tuberculosis (all ages)	...	...	...	...	...	...	...	3

A comparison of the various rates in your District as against England and Wales, the 126 County Boroughs, etc., and the 140 smaller towns, is appended below :—

	England and Wales	126 C.B.'s. and Great Towns including London	148 Smaller Towns Res. Pop. 25,000—50,000 at 1931 Census	Conisbrough Urban District
Rates per 1,000 Civilian Population				
<b>Births :</b>				
Live Births ... ..	17·90	20·00	19·20	24·70
Still Births ... ..	0·42	0·52	0·43	0·72
<b>Deaths :</b>				
All Causes ... ..	10·80	11·60	10·70	10·30
Typhoid & Paratyphoid	0·00	0·00	0·00	0·00
Whooping Cough ...	0·02	0·02	0·02	0·06
Diphtheria ... ..	0·00	0·00	0·00	0·06
Tuberculosis ... ..	0·51	0·59	0·46	0·79
Influenza ... ..	0·03	0·03	0·04	0·18
Smallpox ... ..	—	—	—	—
Acute Poliomyelitis and Polioencephalitis ...	0·01	0·01	0·01	0·00
Pneumonia ... ..	0·41	0·38	0·36	0·42
<b>Notifications (corrected):</b>				
Typhoid Fever ... ..	0·01	0·00	0·01	0·00
Paratyphoid Fever ...	0·01	0·01	0·01	0·00
Cerebro-spinal Fever ...	0·03	0·03	0·02	0·18
Scarlet Fever ... ..	1·73	1·90	1·82	2·12
Whooping Cough ...	3·42	3·51	3·31	0·18
Diphtheria ... ..	0·08	0·10	0·09	0·30
Smallpox ... ..	—	—	—	—
Measles ... ..	9·34	9·75	8·84	10·52
Pneumonia ... ..	0·73	0·84	0·60	1·27
Erysipelas ... ..	0·21	0·23	0·21	0·06
Acute Poliomyelitis ...	0·04	0·05	0·04	0·00
Acute Polioencephalitis	0·00	0·00	0·00	0·00
Rates per 1,000 Live Births				
<b>Deaths :</b>				
All causes under 1 year	34·00	39·00	32·00	58·80
Enteritis and Diarrhoea under 2 years of age ...	3·30	4·50	2·10	4·90
Rates per 1,000 Total (Live and Still) Births				
<b>Notifications (corrected):</b>				
Puerperal Fever and Pyrexia ... ..	6·89	8·90	4·71	9·52

### Infant Mortality Rate.

In all, 24 children under one year of age died during the year, when there were 408 Live Births registered, and this represents an infantile mortality rate of 58·8 per 1,000 live births. The corresponding figure for England and Wales this year is 34, and I feel that in some measure the increase in the Live Birth rate in your District over that in England and Wales (24·7 as against 17·9) to some extent has been the cause of this relatively high infant death rate, which I fully expect to fall rapidly during the next few years. The rate of 58·8 is less than that recorded for last year, when it was 76, and I would like to point out that it is natural for this figure to vary quite widely as the years go by and the rate is generally lowered. The rate for 1948 is less than the average for the last five years, and thus this critical figure would indicate that progress in preventive medicine is being made in your District. With the advent of the fuller personal health services into your area, I feel that one can expect, as the years go by, the trend of infant wastage to be reduced to, or below, that of the average for the country as a whole. Of the 24 children who died under one year of age during the year, the following tables give the cause of death, and also the age of death.

### Infants Under 1 Year of Age 1948.

Age at Death									
Cause of Death	Weeks				Months				Total
	Under 1	1-2	2-3	3-4	1-2	2-3	3-6	6-9	
Prematurity ... ..	6	1	1	—	—	—	—	—	8
Conjenital Malform- ation, Birth Injuries ...	3	1	—	1	—	—	1	1	7
Bronchitis, Bronchopneumonia	—	—	3	—	—	—	2	1	6
Enteritis ... ..	—	—	—	—	1	—	1	—	2
Tuberculous ... ..	—	—	—	—	—	—	—	1	1
Meningitis ... ..	—	—	—	—	—	—	—	1	1
	9	2	4	1	1	—	4	3	24

The 24 infant deaths occurred during the following months of the year :—

### Infant Deaths.

#### 1st Quarter

January	...	...	...	4	
February	...	...	...	1	6
March	...	...	...	1	

2nd Quarter					
April	...	...	...	...	3
May	...	...	...	...	3
June	...	...	...	...	2
3rd Quarter					
July	...	...	...	...	3
August	...	...	...	...	2
September	...	...	...	...	3
4th Quarter					
October	...	...	...	—	
November	...	...	...	1	2
December	...	...	...	1	

## SECTION B.

### 1. GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

(i) The full particulars of the Public Health Officers of your Authority are incorporated for easy reference at the beginning of the report.

#### (ii) (a) **Laboratory Facilities.**

Bacteriological and Pathological specimens are sent to the Medical Research Council Laboratory at Wakefield which is under the direction of Dr. W. F. Lane, and these services are fully adequate. Blood examinations for grouping, Rhesus factor and Kahn tests are undertaken by the Blood Transfusion Service, Sheffield.

#### (b) **Ambulance Facilities.**

The Ambulance facilities for your District are adequate, and a Sub-Depot of the County Ambulance Service is situated at The Priory, Church Street where 1 ambulance car was available during the year. Further ambulances and sitting case cars are available, as required, from the parent Depot at Bentley.

#### (c) **Nursing in the Home.**

The Home Nursing Service for your District was taken over on the appointed day, by the County Council of the West Riding of Yorkshire. As there were no Home Nurses at all in your District in July 1948, arrangements were made to appoint two Nurses early in 1949. I feel there is a wide field for the work of nursing in the home, especially where this is linked up with the nursing after-care of patients discharged from Hospital, and the nursing care of sick infants under 1 year of age in the home.



(d) Treatment Centres and Clinics, including Clinics used solely for diagnosis of consultation.

(i) **Child Welfare Centre, Conisbrough.**

Monday— 9.30 a.m.—12 noon — School Clinic.

2.0 p.m.—4.30 p.m. — Infant Welfare Clinic.

Tuesday— 2.0 p.m.—4.0 p.m. — Ante and Post Natal Clinic.

(ii) **Child Welfare Centre, Denaby.**

Monday— 9.30 a.m.—12 noon — U.V. Ray Clinic.

Tuesday— 9.30 a.m.—12 noon — School Clinic.

1.30 p.m.—4.30 p.m. — Infant Welfare Clinic.

Wednesday—9.30 a.m.—12 noon — Ante and Post Natal Clinic.

Thursday— 9.30 a.m.—12 noon — School Clinic.

11.0 a.m.—12 noon — Immunisation Clinic.

1.30 p.m.—4.30 p.m. — U.V. Ray Clinic.

(iii) Tuberculosis Dispensary, Market Street, Mexborough.

Monday and Wednesday— 10.0 a.m.—12 noon.

The staff at this Tuberculosis Dispensary consists of a Tuberculosis Officer and the Tuberculosis Health Visitor, and a close liaison is kept by your Medical Officer of Health and Sanitary Inspector, and the Medical and Nursing Staff of the Tuberculosis Dispensary. Cases undergoing domiciliary treatment in overcrowded homes are investigated and recommendations for rehousing put to your Housing Committee by the Medical Officer of Health.

(iv) Venereal Disease.

A treatment and diagnostic Clinic is held at 12, Frederick Street, Rotherham, and there are other Centres at Barnsley, Sheffield, and Doncaster.

(e) **Hospitals.**

(i) **General.**

General Hospital services are provided mainly by the Fullerton Hospital, Denaby Main, and the Montagu Hospital at Mexborough, which is nearby your District. The former has 38 beds, and the latter about 120. Both have proved a great boon during the year, and liaison between the Local Health Authority and the Hospital Management Committees has been great. Dr. C. C. Harvey, Paediatrician, and Dr. J. C. A. Renshaw, Junior Obstetrician, both hold Clinics at the Montagu Hospital. During the year, it was thought that the Montagu Hospital would be suitable for the combined

appointment between the two Authorities of a Heath Visitor-Almoner, and this project was investigated. This appointment would enable the After-care work, necessary for discharged Hospital patients in certain instances, to be easily carried out. Other Hospitals serving your area include the Doncaster Royal Infirmary, The Municipal General Hospital, Rotherham, and the General Hospitals, Sheffield.

**(ii) Infectious Diseases Hospital.**

The Conisbrough Isolation Hospital, with its modern cubicle block opened before the war, and the Tickhill Road Infectious Diseases Hospital, Doncaster, have proved entirely adequate for cases of infectious diseases requiring Hospital treatment arising in your area during the year.

**(c) Maternity Hospitals.**

The Maternity Block of the Mexborough Montagu Hospital has only partially been used during the year, owing to difficulties in obtaining trained Midwives. However, the Obstetric Unit of the Moorgate General Hospital, Rotherham, the Hallamshire and Listerdale Maternity Homes, and the Hamilton Annexe, Doncaster, have been available during the year for the confinement of expectant mothers from your District. These booked cases are admitted on a priority system, which includes abnormal Obstetric and Medical conditions, and also bad socio-medical conditions. The services of the Jessop Hospital, Sheffield, where Mr. L. B. Patrick, F.R.C.O.G., Consultant Obstetrician in your area has beds, have been available for abnormal cases. I feel confident that the arrangements for expectant mothers will be even further improved by the National Health Service scheme, and would like to point out that there were no maternal deaths during the year, although there were 408 live births.

**2. Mental Health.**

No Divisional Mental Health Sub-Committee has been formed, and the number of Medical Officers employed in the National Health Services consist of Dr. B. R. A. Demaine, M.B., Ch.B., D.P.H., Assistant County Medical Officer, one Social Worker, Mrs. E. K. Green, B.Sc., two Duly Authorised Officers, Mr. S. Cook and Mr. G. T. Collins. There is no Occupation Centre in your District, although during the year search was made for a suitable site near the locality. Cases requiring Occupation Centre Training were referred to the Occupation Centres controlled by the Doncaster County Borough. The supervision of two patients of the Divisional Area on licence from Institutions was undertaken by the Social Worker on behalf of the Hospital Management Committee.

Ten reports were made upon the advisability of granting holiday leave to Institutional patients to homes in this Division. General reports on home conditions were also supplied when a question of discharge of patients from Institutions arose. No duties were delegated to voluntary associations.

In November, 1948, the Mental Health Social Worker started attending a Mental Health Social Workers' Course organised by the Sheffield University Extra-Mural Department.

### Account of work undertaken in the community.

No work was carried out under Section 28 National Health Service Act, 1946. Mental Hospital After-care was not started until 1949, but five mental defectives formerly in Institutions were under friendly observation during the year. The Mental Health Social Workers' activities during the year covered the following :—

	Mental Deficiency Acts, 1913-1938	
	Division 30	Conisbrough U.D.C.
1. No. of defectives ascertained ... ..	124	47
No. of defectives ascertained during 1948 ... ..	3	1
No. awaiting Institutional vacancies ...	17	9
2. No. under guardianship ... ..	10	2
No. under Statutory Supervision ... ..	109	42
No. under observation ... ..	5	3
3. No. being trained ... ..	10	2

### 3. Maternity and Child Welfare.

#### (i) Midwifery Service.

During the year three Midwives were trained in the use of Gas and Air Analgesia and obtained Certificates of Proficiency in the administration of Analgesia. In addition to this, the Relief Midwife Nurse A. E. Smith, has attended a month's Course at the Sorrento Maternity Home, Birmingham, under the direction of Dr. Mary Crosse, for the domiciliary care of premature children. At the end of the year, the arrival of a premature baby cot was expected.

#### (ii) Maternity Services.

Of the 408 births in your area during the year over 260



mothers were confined in their homes. Ante-Natal Hostel accommodation was available for expectant mothers at Clifton Ante-Natal Hostel, Brighouse. During the year arrangements for Home Helps were made as part of the Maternity Service for Mothers confined in the home.

### (iii) Health Visitors.

During the year, the Health Visitors in your District carried out 328 first visits to children under one year of age, and 60 visits to children between the ages of one to five years.

Subsequent visits to children under one year of age total 1,805, and between the ages of one and five years 944. In addition to these visits to infants, the Health Visitors also carried out 183 Ante-Natal Visits, and 11 special visits. Special visits include cases of Measles, Gastro-enteritis, socio-medical visits, etc.

Clinic attendances were very satisfactory for the year, and a total of 7,239 were made by children in your District. This was made up as follows :—

Children under one year of age ... ..	5,982
Children one to five years of age ... ..	1,255

Expectant Mothers in your District made a total of 1,844 attendances at the Ante-Natal Clinic, Child Welfare Centre, Church Road, Denaby, and the Welfare Centre at Miners Welfare Hall, Garden Lane, Conisbrough, during the year under review.

During the year a start was made in the implementation of the new conception of the Health Visitors duties as being the family case worker.

I wish to express my thanks and gratitude to the Voluntary Committees associated with these two Welfare Centres.

### (iv) Arrangements for Dental, Orthopaedic, Eye, and Other Cases during the year.

#### Dental Services.

There is a County Dental Clinic in the District, situated at the Child Welfare Centre, Church Road, Denaby Main.

#### Orthopaedic Scheme.

Clinics are held twice a month at 20, Christchurch Road, Doncaster. Alternative Clinics to which children from your District can also be sent are held at Rawmarsh and Barnsley.



### **Ophthalmic Service.**

The County Oculist holds a monthly session in the Division, and visits to the schools of your District are carried out on the occasion of each visit.

### **E.N.T. Service.**

One Clinic per month is held for school children at the Montagu Hospital, Mexborough under the direction of Mr. W. L. Rowe, F.R.C.S. A long waiting list of children who have been referred to the Aural Surgeon is being dealt with as expeditiously as possible.

### **Paediatric Clinic.**

One Paediatric Clinic is held each month, where special cases recommended by the Assistant County Medical Officers or General Practitioners are seen by the Child Health Officer, Dr. C. C. Harvey. In addition to this, children can be referred to Dr. Harvey at his bi-monthly Clinic at the Montagu Hospital.

### **Ultra-Violet Ray Clinic.**

Two Clinics per week are held at the Denaby Child Welfare Centre, for children who are referred from their own Doctors or from the Assistant County Medical Officers, from the whole of the Divisional area. Children are given a complete progressive course under the care of an Assistant County Medical Officer.

### **4. Section 47 of the National Assistance Act, 1948.**

No action under this Section was taken during the year.

## **SECTION C.**

### **SANITARY CIRCUMSTANCES OF THE AREA.**

The main difficulty from the Public Health aspect of the housing problem in your area has been the control of the conditions under which families are living, often in overcrowded circumstances, in some of the worst of your sub-standard property. During the year, these conditions have in some instances become a hazard to the health of expectant and nursing mothers, and young children living in them. In this respect I would remind you that in your highly industrial area only a third of the homes have a supply of hot water for domestic purposes.

In order to control the relatively high infant mortality and morbidity rate in the families living in some of your sub-standard property arrangements were made, during the year, for the Health Visitors to visit them as frequently as possible,

to ensure that every possible advice is given, and precautions taken to minimise the detrimental effects on the childrens health whilst living under these lowered housing standards. It is felt by me that by this action, together with the prompt execution of essential repairs, we will diminish in the next few years, the part of the infant wastage occurring in your district owing to living in these lowered standards.

During the year, your decision was made to rehouse those cases of Tuberculosis living under such overcrowded conditions where children had to sleep in the same bedroom as the parents who were suffering from this disease. Four such cases were rehoused by the end of the year.

I have been impressed by the issue of statutory notices under Section 93 of the Public Health Act, 1936, and Section 9 of the Housing Act, 1936, in respect of houses which require repair. Although the majority of such notices had been complied with and the specified repairs executed, I would like to point out that at the end of the year some such notices in respect of sub-standard properties were still outstanding.

Owing to the diversity of sanitary problems associated with environmental hygiene, and the relatively large number of your population, I considered, after due thought, that I should recommend Mr. R. E. Ingleby, M.S.I.A., to be granted additional help in order that the field may be covered adequately.

### **Water Supplies.**

The supplies in this District are obtained from boreholes, the water being purchased from the Doncaster and Tickhill Joint Water Board and the National Coal Board. A portion of this water is delivered into a service reservoir, situate at Conanby, but the majority of the water is obtained directly out of the service mains as they enter the district, a constant supply being thus maintained.

The majority of the houses in the Denaby district receive their supply direct from the National Coal Board who act as water authority for that area.

### **Purification.**

The National Coal Board supply is treated for hardness, chlorinated and followed by a filtration process. Further treatment by the Local Authority is not undertaken, whilst the Doncaster Tickhill Joint Water supply receives no treatment at all.

### Analysis.

Thirty-five samples of water were submitted for bacteriological analysis by the Conisbrough Urban District Council and the National Coal Board during the year. Three of these samples contained coliform bacilli in 100 c.cs. and are classed as a second class supply, the remainder were first class waters.

### Chemical Analysis.

Two reports of this type of analysis from samples submitted during the year, show that all the water is satisfactory, it is definitely hard, and the hardness is of a temporary character.

### Supply.

The approximate number of dwelling houses supplied in the district is 4,070.

## SECTION F. PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

During the last quarter of the year an outbreak of Measles occurred amongst the infants and school children of your District and 160 cases were notified. At the time in question Measles serum for prophylaxis or attenuation of the disease was not used. There were no deaths from this disease.

Although twelve cases of diphtheria were notified, after investigation in Hospital only five were confirmed with one death. During the year, mostly due to the untiring efforts of the Medical Practitioners and my predecessor in particular, 233 children were completely immunised and eleven children were given booster immunisation as is shown by the following table.



Date of birth	Conisbrough U.D.C. 1948 Nos. of children immunised	Nos. of children who received booster injections
1935 ... ..	—	—
1936 ... ..	—	—
1937 ... ..	—	1
1938 ... ..	1	—
1939 ... ..	—	—
1940 ... ..	2	1
1941 ... ..	3	3
1942 ... ..	7	4
1943 ... ..	8	1
1944 ... ..	15	—
1945 ... ..	17	—
1946 ... ..	47	1
1947 ... ..	130	—
1948 ... ..	3	—
	<hr/> 233 <hr/>	<hr/> 11 <hr/>

During the year it was decided that a further intense diphtheria immunisation scheme should occur in the schools and Clinics during 1949.

Although only a few cases of Whooping Cough were notified during the year, there was one death from this disease, and requests from parents with young children were received for a combined pertussis-diphtheria antigen to be used in the Clinics. It was observed, however, that the efficiency of the combined vaccine was not, as yet, proven and that controlled field trials of various types of vaccine were taking place throughout the country.

### INFECTIOUS DISEASES.

#### Notifiable Diseases (Other than Tuberculosis) During 1948.

Disease	Total cases notified	Cases admitted to Hospital	Deaths
Measles ... ..	174	—	—
Whooping Cough ... ..	3	—	1
Small Pox ... ..	—	—	—
Scarlet Fever ... ..	35	27	—
Diphtheria ... ..	12*	12	1
Enteric Fever ... ..	—	—	—
Ophthalmia Neonatorum ... ..	4	2	—
Puerperal Pyrexia ... ..	4	4	—
Pneumonia ... ..	21	1	7
Encephalitis Lethargica ... ..	—	—	—
Acute Poliomyelitis ... ..	—	—	—
Erysipelas ... ..	1	—	—
Cerebro-spinal Fever ... ..	3	3	—

\* 5 cases confirmed



# INFECTIOUS DISEASES — 1948. AGE DISTRIBUTION.

The following table indicates the age groups of the total notified cases :—

Age	Scarlet Fever	Diphtheria	Pneumonia	Measles	Whooping Cough	Acute Polio- myelitis	Erysipelas	Cerebro- Spinal Fever	Puerperal Pyrexia	Ophthalmia Neona- torum
Under 1 ...	1	—	—	10	—	—	—	1	—	4
1 — 2 ...	4	1	—	16	—	—	—	—	—	—
2 — 3 ...	3	—	1	23	2	—	—	—	—	—
3 — 4 ...	1	3	—	37	—	—	—	—	—	—
4 — 5 ...	5	1	—	38	—	—	—	—	—	—
5 — 10 ...	18	4	—	48	1	—	—	—	—	—
10 — 15 ...	2	2	1	2	—	—	—	—	—	—
15 — 25 ...	1	—	6	—	—	—	—	2	1	—
25 — 45 ...	—	1	6	—	—	—	—	—	3	—
45 — 65 ...	—	—	4	—	—	—	1	—	—	—
Over 65 ...	—	—	3	—	—	—	—	—	—	—
Total ...	35	12	21	174	3	—	1	3	4	4

The following table gives particulars of new cases of Tuberculosis and Deaths from the Disease in your district during 1948 :—

### TUBERCULOSIS.

#### New Cases and Mortality During 1948.

Age periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0 — 1 ... ..	—	—	1	—	—	—	—	—
1 — 5 ... ..	—	—	—	—	—	—	—	—
6 — 15 ... ..	1	1	2	—	—	—	1	—
16 — 25 ... ..	2	3	2	—	3	—	1	—
26 — 35 ... ..	2	3	1	—	2	2	1	—
36 — 45 ... ..	1	—	—	—	—	—	—	—
46 — 55 ... ..	1	1	—	—	1	—	—	—
56 — 65 ... ..	—	—	1	—	2	—	—	—
65 and upwards	—	—	—	—	—	—	—	—
Total ...	7	8	7	—	8	2	3	—

The efficiency of notification of Tuberculosis in your Area is high and there were no non-notified Tuberculosis Deaths. There was no excessive incidence of, or mortality from, Tuberculosis in any particular occupation in the Area.

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**ANNUAL REPORT OF  
THE SANITARY INSPECTOR**  
of the  
**CONISBROUGH URBAN DISTRICT COUNCIL**  
For the Year Ended 31st December, 1948.

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To the Chairman and Members of the  
Conisbrough Urban District Council.

Mr. Chairman and Gentlemen,

I have pleasure in presenting to you a report on work carried out by the Sanitary Inspector's Department, which includes the Public Cleansing Service, during the year.

**Water Supplies.**

In addition to the information supplied in the Medical Officer's Report upon this matter, we wish to report that as a result of the questionable samples the reservoirs were cleaned out. This work had the desired result.

**Drains and Sewerage.**

No extensions to the sewers or sewage works have been made during the year. The extension of future housing will probably involve not only extended sewerage, but extension work being carried out to the sewage plant at Denaby.

In times of heavy rain, storm water facilities appear to require review, because of the nuisance created from the man-hole covers being forced by the pressure of water contained in the sewers.

Repairs and additional connections have been made to existing drainage during the year, resulting in additional conveyance of waste water being added to the sewerage system. With the introduction of the conversion of waste water closets, one can quite foresee further additional work being placed on these sewers.

The standard of workmanship with regard to drainage is considerably improving, but due to the age of some of the property, it will be a long time before questionable drainage is eliminated altogether.

### Closet accommodation.

There are at present within the district the following forms of sanitary conveniences :—

Pail closets ... ..	2
Privy middens ... ..	16
Pedestal water closets ... ..	4,572
Waste water closets ... ..	162
Trough closets ... ..	28

The Council's policy of the conversion of the more undesirable type of sanitary convenience has much to commend it and rapid strides in this matter, should, with the adoption of direct labour methods, be possible, unfortunately these methods will not be implemented until next year, primarily due to the labour situation.

### Rivers and Streams.

It has not been found necessary to take any action with regard to the pollution of any rivers or streams in the district throughout the year.

### Smoke Abatement.

Three observations with regard to smoke pollution have been taken during the year. The accepted fact of two minutes black smoke per half hour was exceeded on two occasions, the industries causing the nuisance were notified at the time. Since this occurred different types of firing have been tried, without the hoped for result and new fire-boxes are being put in use, with a view to decreasing this nuisance.

The introduction of this new type of box, which works upon a far higher water gauge air pressure is improving combustion, but may cause an increase in grit deposit.

It is anticipated that with the increased height of the power station chimneys situate in the adjoining district, the sulphur content will be considerably reduced.

### Shops.

69 visits were made during the year to shop premises for purposes appertaining to the Shop Acts and the Food and Drugs Act, 1938. In the majority of cases, premises were found to be in satisfactory condition, but there is an increased desire amongst shopkeepers to sell ice-cream irrespective of the business carried on in the shop, and it has been found necessary to dissuade certain people with this desire until additional facilities have been provided.



### Swimming Baths.

The Local Authority possesses one swimming bath in this area, which unfortunately does not contain the necessary plant to purify the water and therefore cannot be used for its intended purpose.

### Sanitary Inspection of the Area.

No. of inspections of Schools ... ..	0
do. Factories ... ..	25
do. Bakehouses ... ..	3
do. Dairies and Cow Sheds ... ..	12
do. Refuse Tip ... ..	48
Complaints received and investigated ... ..	655
No. of re-inspections made ... ..	113
Visits made to houses (re. cases of Infectious disease)	45
Number of houses disinfected ... ..	45
No. of drains tested ... ..	64
Total number of defects discovered ... ..	850
Informal notices served ... ..	63
Statutory Notices served ... ..	14
No. of nuisances abated ... ..	553

### Chief Sanitary Requirements of the District.

Some of these have been dealt with in detail in other portions of this report, briefly these are as follows :—

- (1) The conversion of Privy Middens into Water Closets.
- (2) The conversion of Trough Closets into Water Closets.
- (3) The conversion of Waste Water Closets into Water Closets.
- (4) The paving of back streets and unmade roads.
- (5) The clearing of previously demolished housing sites.
- (6) The redevelopment of these sites where possible.

### List of Nuisances Discovered.

- 33 Defective drains.
- 1 Choked sewer.
- 4 Defective soil pipes and W.C.
- 37 Defective rainwater pipes, gutter and roofs.

- 35 Defective and wet plaster work.
- 12 Dirty and verminous houses and premises.
- 3 Dangerous buildings.
- 1 Dirty and delapidated closet.
- 11 Accumulations of Refuse.
- 1 Defective and uneven gully.
- 7 Insanitary sinks.
- 19 Defective fire ranges.
- 2 Defective slop water pipes.
- 3 Choked waste water closets.
- 3 Defective tipplers to Waste Water Closets.
- 7 Choked W.C's.
- 11 Insufficient and unsatisfactory ventilation.
- 2 Burst Water Pipes.
- 3 Defective floors.
- 337 Miscellaneous Nuisances.
- 83 Rodent Infestations.

### **Housing.**

127 Inspections were made resulting from complaints relating to housing within the district, 33 were in connection with rehousing families into new Council Houses, the rest were relating to defects, delapidations and repairs, considerably more re-inspections were made for the purposes of ascertaining that the specified works had been executed, in the case of minor repairs these had been found to be executed but this does not appertain in the case of major works, and the only alternative appears to be the prosecution of the law to the full extent.

### **Demolition.**

Number of houses visited 2, one house to which an undertaking was accepted in 1937, has been demolished and the site cleared. Another house has been represented under Section 11 of the Housing Act, 1936.

### **General Observations of Housing Conditions in the District.**

The acute position resulting from the demand for new houses is still with us, overcrowding is still a major factor of all house letting programmes. This district suffers very badly from this feature which brings many undesirable practices with it, notably lack of sufficient air in the sleeping rooms when occupied, too many people of different ages and sexes

occupying one bed, young and old sleeping together, rooms receiving insufficient attention to keep them clean because of stored goods and chattels, some loss of interest in the house by some few of the women folk. These are only a few of the features which make the future housing programme of the district a major problem in relation to Public Health work.

Council's decision that lodgers may be taken into Council houses as an effort to ease the acute housing shortage has much to commend it, but it must not be forgotten that the previously stated features are bound to occur as families increase in size, futhermore, rapid depreciation of the property must be expected resulting in increased repair costs.

Another factor of grave concern is the delapidated condition which some of the older property has been allowed to get into, and which is still occupied. This condition has probably been caused through the war, the inability to obtain building licences for certain materials, the disinterested attitude of some of the owners with regard to the condition of their property, the high cost of repairs at present appertaining, or a mixture of these, but this does not alter the condition under which some people are living. The cost of the repairs at present involved will place this property within the orbit of Section 11 of the Housing Act, 1936 and would thus make a further demand upon the housing allocation to the district.

Whether landlords will be willing to adopt the provisions of the Housing Act, 1949 in order to obtain some return out of the property and provide the specified facilities in order to obtain grant aid is a matter of conjecture, the provision of a bath, hot water for domestic purposes and indoor sanitation will satisfy a long felt want, but this cost coupled with extensive repair costs, may prove too costly an item.

The allocation of houses against the certified Medical Certificate of the Medical Officer of Health has much to commend it and fulfils a long felt want.

### **Eradication of Bed Bugs.**

Number of Council houses found to be infested ...	1
Number of other houses found to be infested ... ..	7
Number disinfested by the Council ... ..	5
Number disinfested by the property owner ... ..	3



The disinfection of Council's property is carried out by Council's workmen at the expense of the occupier, spray agents being used for this purpose and the desired result has been obtained by this method.

In the case of the private property treated by the Council at the owners request, satisfaction has been expressed at the result obtained, in these cases, however, the owner is charged with the costs.

The eradication of this pest cannot be prosecuted too vigorously, the reluctance shown by some families to disclose this information is unpardonable, a healthy family cannot be obtained when such pests are allowed to exist in the property.

### **Tents, Vans and Sheds.**

Number in the district, 6.

### **Number of Houses Erected During the Year.**

A total number of 33 permanent houses have been erected during the year, this is a commendable effort under the present shortage conditions, one hopes however, that the Ministry will increase the district allocation otherwise it is doubtful if we shall live to see the present demands satisfied.

## **FOOD.**

### **Inspection of Food.**

#### **Milk Supply.**

Inspections have been carried out of the producer's premises and the dairies used by wholesalers and retailers in the district. These have been found to be in a satisfactory condition at the time of inspection.

The conditions of the vehicles used for retail purposes have improved with the introduction in the majority of cases of electrically propelled vehicles, these however do not in all cases provide adequate protection from the glare of the sun whilst in the process of delivery.

There has been no additions to, or deletions from, the register of retailers and producers during the year and the quantity supplied has not been decreased. Most of this is heat treated milk.

#### **Meat and Other Foods.**

The meat supply for the district is still obtained from the M.O.F. slaughter house at Sheffield and delivered to a



central point in the district for distribution to the local butchers. Complaints are sometimes received with regard to transportation and I am of the opinion that this could still be improved.

The butchers' shops upon inspection have proved satisfactory, but the conditions appertaining in the making up have not all been made satisfactory in accordance with the provisions of the Food & Drugs Act, 1938. Here again difficulty is being experienced in obtaining the necessary building labour, materials, and permits.

### Ice-Cream.

The sale of this commodity has considerably increased in this district during the past year, 23 samples were taken and 14 were placed in class 1 upon Bacteriological examination, it has been found necessary in certain cases of mobile stalls to give warnings because of dirty practices in the sale of this commodity.

Numerous shopkeepers are now taking interest in the possibility of adding this commodity to the sales of their premises, this will prove beneficial to the district and will probably effect the number of hawkers plying this trade, unfortunately, however, all these premises do not satisfy the demands of the Food & Drugs Act, 1938, and by Council's attitude towards this matter, that these demands must be satisfied before business is commenced will make an improvement in the standard of shops, this is already being manifested.

### Seizure of Unsound Food.

No legal proceedings were necessary in respect of this matter during the year.

The quantities of food condemned during the year were as follows :—

6 stns. Fish	8 lbs. Jam
37 tins Evaporated Milk	3 lbs. Sugar
36 pkts. Sponge Mixture	30 lbs. Sweets
3 tins Beef Loaf	10½ lbs. Bacon
1 lb. Prunes	19 jars Pickles
1 tin Peas.	401 pkts. Soup
14 lb. Tea	2 tins Nestles Milk
3½ lbs. Butter	14 tins Tomatoes

$\frac{1}{2}$ lb. Cheese	1 tin Sausage Meat
28 dozen Eggs	3 tins Fish Spread
6 dozen Toffee Bars	36 pkts. Gravin
3 tins Stewed Steak	4 tins Soup
1 tin Grape Fruit	24 $\frac{1}{2}$ lbs. Figs
5 $\frac{3}{4}$ lbs. Roast Beef	3 tins Pilchards
24 bars Chocolate	3 tins Salmon
1 tin Mussels	14 lb. Pearl Barley

### Public Cleansing.

An increased call is being made upon this service by the expansion of the housing programme and the abolition of ashpits in this district, although the latter matter is at present proceeding rather slowly due to two factors:—

a. The inability of private contractors to fulfil closet conversion contracts. This however will be rectified when direct labour scheme is put into operation.

b. Certain findings held in Court cases in other areas has definitely altered the prospect of obtaining the policy of weekly collection of dustbins at the present time.

It would appear desirable that under these circumstances the Council can only obtain the desired result by exercising its powers under the Public Health Act to obtain its objective.

### Vehicles.

Orders have been placed for mechanical loading vehicles to replace the existing vehicles which are proving so expensive in maintenance charges.

### Tipping.

This problem which proved so disconcerting last year, will probably be solved to the benefit of the community, by the negotiation for other sites which the Council are carrying out at the present time, and the resultant playing fields therefrom will satisfy a long felt demand.

### Salvage.

Monies obtained from this source have again been increased over last years figures, whether such improvement

can be maintained for another year is a matter of speculation, the acute position of obtaining raw materials appears to be easing and a decrease in prices offered for salvaged materials is only to be expected.

### Refuse Disposal.

8,146 tons of Refuse was removed from the district at a cost of £3,463/16/1 this resulting in a cost per ton of 8/6.

The cost per house was 17/3 $\frac{1}{4}$ .

39 loads of night soil was removed at a cost per house of £2/3/7 per year.

I remain,

Your obedient Servant,

ROBERT E. INGLEBY,

Sanitary Inspector.

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